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Inder the Papery	work Reduction Act of 1995, no persons are required		d to a collection of in	formation unless it dis	plays a valid OMB control number.			
UTILITY PATENT APPLICATION			First Inventor or Application Identifier					
	TRANSMITTAL	Title			i.			
	onprovisional applications under 37 C.F.R. § 1.53(b))	Expres	s Mail Label No.		ລັ			
	PPLICATION ELEMENTS apter 600 concerning utility patent application content	s.	ADDRESS					
84 ! A I	ee Transmittal Form (e.g., PTO/SB/17) ubmit an original and a duplicate for fee processing)		5. Microf	iche Computer Pro				
2. X Spe (pre - Do - Co - Si - Ri - Bi - Do - Co - Ai 3. X Dra 4. Oath or C a. D.	ecification [Total Pages 1.7] ecification [Total Pages 1.7] escriptive title of the Invention ross References to Related Applications tatement Regarding Fed sponsored R & D eference to Microfiche Appendix ackground of the Invention rief Summary of the Invention rief Summary of the Invention rief Description of the Drawings (if filed) retailed Description laim(s) bistract of the Disclosure awing(s) (35 U.S.C. 113) [Total Sheets 6] Declaration [Total Pages 7] X Newly executed (original or copy) Copy from a prior application (37 C.F.R. 6) i. DELETION OF INVENTOR(S) Signed statement attached delet inventor(s) named in the prior appl see 37 C.F.R. §§ 1.63(d)(2) and 1.7 TEMS 1.8.1 IN ORDER TO BE ENTITY TO F.R. § 1.27) DINA PRIOR APPLICATION IS RELIED UPON 137 C.F.R. § 1.27) DINA PRIOR APPLICATION IS RELIED UPON 137 C.F.R. § 1.27)	ing ication, 33(b).	(if applicable a. b. c. ACCOI 7. Assigr 8. 37 C.F. (when 9. Englis 10. Inform Staten 11. Prelim 12. X Return (Show.) 13. X Staten (PTO/S) 14 Certific	Paper Copy (identification) Paper Copy (iden	g identity of above copies LICATION PARTS For sheet & document(s)) For any content of the power of the pow			
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP) of prior application No: Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
			ICE ADDRESS					
☐ Custom	133333333333333333333333333333333333333	o, or Attac	h bar code label here	•	espondence address below			
Name	Alexander Blake			 				
Address	1837 East Terrace Dr	ive						
City	Lake Worth s	ate	Florida	Zip Code	33460			
Country	Telepho	ne		Fax				
Name (F	PonnyType) Alexander Blake	2	Registration	No. (Attorney/Agent)				
Signature	· Shanner Blan	<u>la</u>	,<u>-</u>	Date	7/26/2001			

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FEE TRANSMITTA	Complete if Known									
I LE INANSIMII IAL		Application Number			ber					
for FY 1999		Filing Date								
Patent fees are subject to annual revision.		First Named Inventor			entor					
Small Entity payments must be supported by a small entity state										
otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28										
TOTAL AMOUNT OF PAYMENT (\$)		Group / Art Unit								
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.								
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)								
1. The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES									
indicated fees and credit any over payments to:		e Entit	y Sma Fee	ıll Entity Fee				F D-id		
Deposit Account		de (\$)		e (\$)	reet	Description	1	Fee Paid		
Number		130	205	65	Surcharge - late t	•				
Deposit Account Name		50	227	25	Surcharge - late ; cover sheet.	provisional fili	ing fee or			
		130	420	130	Non-English spec	rification				
Charge Any Additional Fee Required	139	2,520			For filing a reque		unation			
Under 37 CFR §§ 1.16 and 1.17				920*	Requesting public					
2. X Payment Enclosed:	112				Examiner action					
Check Money Other	113	1,840*	113	1,840*	Requesting public Examiner action	cation of SIK	апег			
FEE CALCULATION	115	110	215	55	Extension for rep	ly within first	month			
	116	380	216	190	Extension for rep	ly within seco	and month			
BASIC FILING FEE Large Entity Small Entity	117	870	217	435	Extension for rep	•				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118	1,360	218	680		ion for reply within fourth month				
404 750 204 200 1With fire for	128	1,850	228	925	Extension for rep	ly within fifth	month			
101 760 201 380 Childy filling fee 380 00	119	300		150	Notice of Appeal	· · ·				
107 480 207 240 Plant filing fee	120			150	•	a brief in support of an appeal				
108 760 208 380 Reissue filing fee	121	260 1,510		130		Request for oral hearing Petition to institute a public use proceeding				
114 150 214 75 Provisional filing fee SUBTOTAL (1) (\$\) 380.00		110	240	55		on to revive - unavoidable				
		1,210			Petition to revive	on to revive - unintentional				
2. EXTRA CLAIM FEES		1,210			Utility issue fee (d	or reissue)				
Fee from Extra Claims below Fee Paid	143			215	Design issue fee					
Total Claims20** = X=	144	580	244	290	Plant issue fee					
Independent 3** = X =	122	130	122	130	Petitions to the C	ons to the Commissioner				
Multiple Dependent =	123	50	123	50	Petitions related	to provisional	applications			
**or number previously paid, if greater; For Reissues, see below	126	240	126	240	Submission of Inf	formation Dis	closure Stmt			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	581	40	581	40	Recording each ;					
Code (\$) Code (\$)	146	760	246	380	property (times n		•			
103 18 203 9 Claims in excess of 20	'''		240	000	Filing a submissi (37 CFR § 1.129	on aner iinai (a))	rejection			
102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid	149	760	249	380	For each addition					
109 78 209 39 ** Reissue independent claims					examined (37 CF	·K § 1.129(b)))			
over original patent	Other fee (specify)									
110 18 210 9 ** Reissue claims in excess of 20 and over original patent			Other fee (specify)							
SUBTOTAL (2) (\$)	Red	uced by	Basi	Filing i	Fee Paid	SUBTOTAL	. (3) (\$)			
SUBMITTED BY						Complete (d	f applicable)			
Name (Print Type) Alexander Blake	1	Regist (Attorne				Твіврһопв	561-53	3-0003		
RIGHTANICE BIANC		1000me	yinge	119		Date	7/26/			
Signature //		_				Sala	1/261	2001		

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